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ABSTRACT

Schools can be the optimal place for the coordination of the efforts of educators, families and mental health professionals to ensure that every child learns in a safe, healthy and supportive environment. Mental health services are an important resource that schools provide to help students benefit from education. By removing social/emotional barriers to learning and teaching new skills, mental health interventions can enhance student achievement and aid a student in becoming a successful and productive citizen. Research supports the fact that effective interventions and a positive school climate contribute to improved student achievement. It is also known that it is best to intervene early with social/emotional problems. Therefore, increasing understanding and early identification of mental health problems as well as improving access to services will lead to better educational outcomes. This guide is designed for parents and school staff who may have questions about the mental health services available in Colorado schools and how to access these supports for students who are experiencing behavioral or social/emotional problems. Its purpose is to provide answers to many of the questions that often arise about school mental health services. (GCP)

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COLORADO DEPARTMENT OF EDUCATION

SPECIAL EDUCATION SERVICES UNIT

A GUIDE TO SCHOOL MENTAL HEALTH SERVICES

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Developed by the Colorado Department of Education (CDE) Special Education Services Unit, this *Guide to School Mental Health Services* was designed to assist school personnel, students and their families in understanding and accessing mental health services in school and during transition from school.

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A Guide to School Mental Health Services

Introduction

Students today face many challenges. According to the *Surgeon General's Report on Mental Health* (1999), an estimated one in five students will experience a mental health problem during their school years, with 11% experiencing a significant mental health impairment. Schools offer an environment in which children, families, educators, and community members have opportunities to learn, teach, and grow. During the school day students encounter positive adult and peer role models, regular opportunities to experience academic and social success, and social interactions that foster enduring peer and adult relationships. Therefore, schools can be the optimal place for the coordination of the efforts of educators, families and mental health professionals to ensure that every child learns in a safe, healthy and supportive environment.

Mental health services are an important resource that schools provide to help students benefit from education. By removing social/emotional barriers to learning and teaching new skills, mental health interventions can enhance student achievement and aid a student in becoming a successful and productive citizen. Research supports the fact that effective interventions and a positive school climate contribute to improved student achievement. It is also known that it is best to intervene early with social/emotional problems. Therefore, increasing understanding and early identification of mental health problems as well as improving access to services will lead to better educational outcomes.

This guide is designed for parents and school staff who may have questions about the mental health services available in schools and how to access these supports for students who are experiencing behavioral or social/emotional problems. This guide is not intended to provide legal interpretation or advice. In many cases local school district policies will provide further clarification of the issues presented in this guide. Its purpose is to provide answers to many of the questions that often arise about school mental health services.

What Are School Mental Health Services?

School mental health or psychological services are the supports that students receive to enhance social/emotional or behavioral adjustment and well-being. These services range from school-wide prevention efforts to individualized, intensive interventions. Prevention activities may include classroom meetings that help students learn problem solving and coping skills. For example, teaching a lesson on appropriate ways to respond to bullying is considered a mental health support.

Students who have more severe or longstanding behavioral or social/emotional needs may require more intensive services. In these cases a counselor, school social worker, or school psychologist may work with a student individually or in a small group.

In the event of a crisis affecting the entire school, such as the death of a student, teacher, or other emotionally distressing situations, school mental health professionals provide crisis response counseling and support to students, school staff, and their families.

Increased academic performance, improved attendance, increased engagement in academic activities and fewer disruptions to the learning environment are some of the positive outcomes that occur when a continuum of services is provided that includes prevention, early intervention and treatment of severe mental health problems.

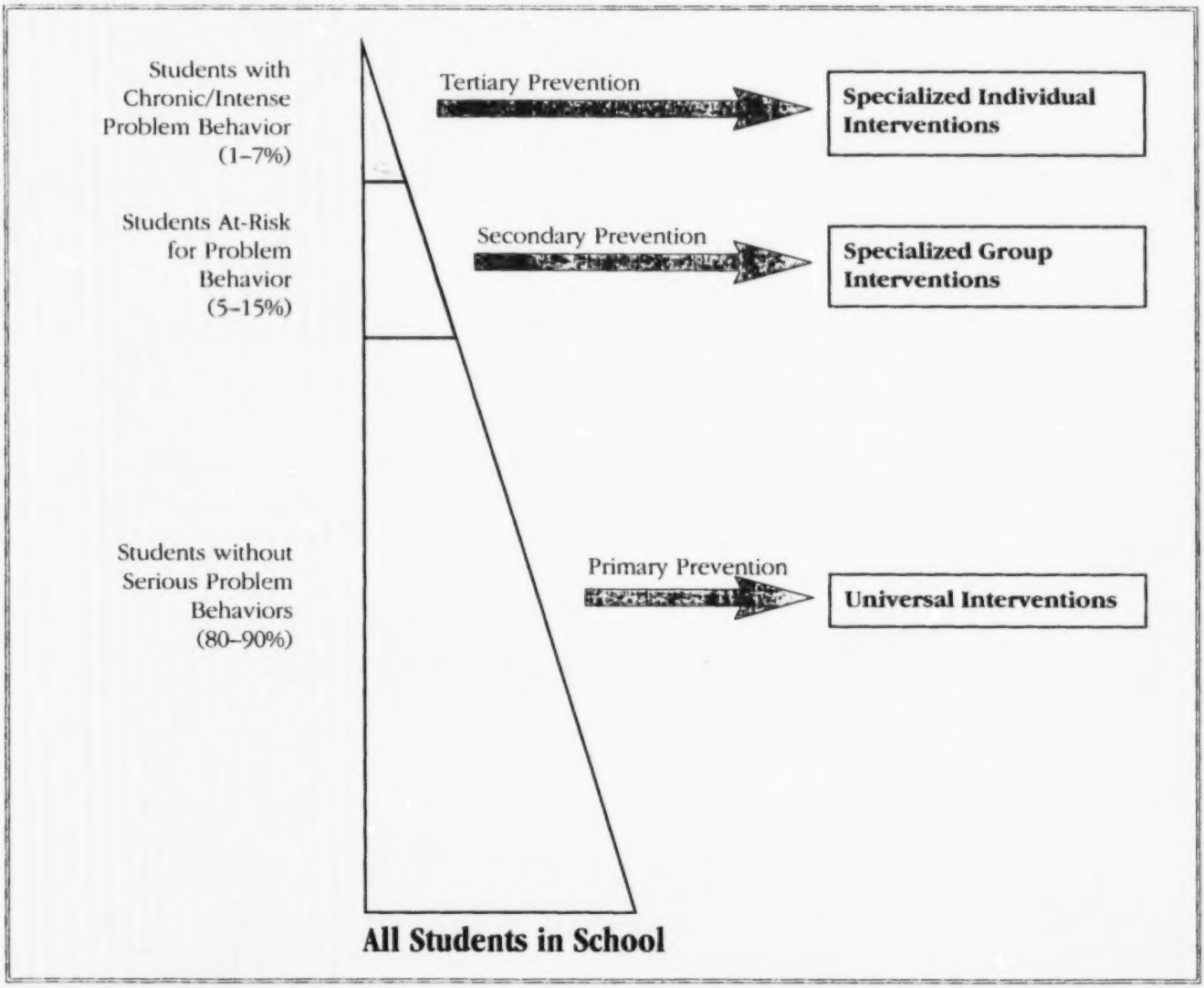
In schools, mental health services may include:

- consultation with educators and parents regarding child development, academic performance and social skills,
- assessment of social/emotional development and learning needs of referred students,
- training in problem solving and coping skills,
- individual counseling,
- group counseling,
- affective education in the classroom,

- behavior support and intervention plans,
- crisis prevention and intervention,
- parent counseling and education related to their child's disability, including:
  - assisting parents in understanding the special needs of their child,
  - providing parents with information about child development and parenting skills,
  - helping parents to acquire the necessary skills that will allow them to support the implementation of their child's Individual Education Program (IEP) or Individual and Family Support Plan (IFSP), and
- coordination of community services and resources.

Continuum of Positive Behavior Supports

A comprehensive school mental health program provides a continuum of services across a variety of school settings. The following diagram illustrates a continuum of positive behavioral interventions and supports. This model applies to behavior, but is equally applicable to mental health issues. This model represents all students in a school building. It shows that the majority of students respond well to basic prevention efforts that are implemented school-wide. Approximately 5–15% of students will respond well to more specialized interventions, while a smaller number, approximately 1–7%, need more intensive, individualized supports.



The Continuum of Positive Behavioral Intervention and Support, G. Sugai/T. Lewis—Behavior Training: Colorado Department of Education—2000

Carl: An Example of an Individual Intervention

Carl is a middle school student who has been referred to the assistant principal for bullying a younger student. Carl's behavior has been getting worse over the last several months. He fights with other students and has been having angry outbursts in the classroom. After trying many interventions that did not seem to improve Carl's behavior, the assistant principal referred him to the school psychologist for individual counseling and behavior support. The school psychologist met with Carl and his parents to determine the antecedents or causes and consequences for his behaviors, and then taught Carl specific techniques for expressing anger in more appropriate ways. After learning new problem solving and coping skills, Carl's behavior in class improved. The school psychologist also consulted with Carl's teachers to help them learn better techniques for interacting with Carl in the classroom. After school activities were also utilized to reinforce appropriate peer interactions.

What Are Signs that a Student May Need Mental Health Services?

Parents, teachers, and other school personnel are often in a position to observe changes in a student's behavior that may be cause for concern. These signs should never be ignored. Rather, communicating the concerns to a mental health professional may help determine if behaviors are developmentally appropriate or if there is need for further evaluation.

Some behaviors that may indicate a need for a mental health referral include:

- skipping school or missing classes,
- difficulty in getting along with family or friends,
- mood swings or often appearing "down,"
- changes in dress or appearance,
- a decline in grades,
- often preferring to be alone,
- not sleeping or sleeping too much,
- talking about death or hurting oneself, others, or animals,
- loss of interest in activities/hobbies,
- frequent irritability or anger,
- use of alcohol or drugs, and/or
- change in eating habits.

How Is an Initial Referral Made?

A student's parents, teachers, principal, other school personnel, or the student himself/herself can bring their concerns to the attention of school mental health professionals. When a concern about a student is raised, a referral may be made to a designated school team often called a "child study team" or "student assistance team," made up of school support staff and trained teachers. The team also serves as a "teacher assistance team," providing consultation and advice to teachers about how their classroom procedures might be modified or adapted to meet a student's unique needs. Team members may counsel the student and/or the student's parents about ways to alleviate the problem or the team may consult with the parents in order to develop a positive behavior intervention plan. Recommendations may include a referral for in-school services such as skill building or support groups, after school activities or a referral for services outside the school.

Brad: An Example of a Group Intervention

Brad is a fifteen-year-old high school sophomore who was hospitalized briefly for Bipolar Disorder. He is currently taking medication for his disorder and is seeing a therapist in the community on a regular basis. Brad has above average ability and despite his health concerns, is making excellent grades in his classes. However, since his hospitalization, Brad has been experiencing difficulties with friendships. He feels rejected and isolated from his friends. After receiving parent permission, the school counselor began working with Brad to discuss ways to help him feel more accepted by his peers. After several brief sessions, Brad agreed to participate in a support group to help him make and keep friends. In the group, Brad learned specific social skills and he received positive feedback from the group about his attitude and his personality. He is making progress in using these skills to reconnect with old friends and to interact with classmates.

What if More Intensive Services Are Needed?

If the child study team has assessed the needs of the student and tried various strategies and positive behavioral supports for a period of time without improvement in general education, then more intensive services may be needed. With parent involvement and consent, the student can be referred to the school's special education team for an evaluation to determine whether he/she is eligible for special education services due to a disability. The Individual Education Program (IEP) team, including the parents, the student when appropriate, school mental health professionals, general education teacher, special education teacher, school administrator, and other support personnel, decides whether the student meets specific state eligibility guidelines for special education services.

If it is determined that the student meets the criteria and needs special education services, the team will develop an IEP to meet the unique needs of the student. If mental health services are needed for the student to benefit from special education, they should be included on the IEP as a "related service."

In addition, if it is determined that the student needs further involvement with community mental health agencies or other community services, they may be referred. The school social worker is specifically trained in community organization, partnerships, and resource attainment.

What Are "Related Services?"

The Individuals with Disabilities Education Act (IDEA), a federal law revised and reauthorized in 1997, defines related services as supportive services that are based on the needs of the student and are required to assist a child with a disability to benefit from special education.

Related services include a wide range of mental health and other services including:

- psychological services,
- counseling services, including rehabilitation counseling,
- school health services,
- social work services,
- parent counseling and training,
- early identification and assessment of disabilities in children,
- speech–language pathology and audiology services,
- physical therapy,
- occupational therapy,
- orientation and mobility for students with visual impairments, and
- medical services for diagnostic or evaluation purposes.

Related services, including psychological services or other counseling services, should be included on the IEP when they will allow the student to better access general education.

Who Provides Mental Health Services in the Schools?

School districts employ school counselors, school psychologists, school social workers, and school nurses who provide a range of mental health supports to students and their families. Federal and Colorado laws define the roles and qualifications of these professionals. School mental health professionals are trained according to stringent professional criteria. In addition, school mental health providers must abide by their own professional and ethical standards that guide the provision of services to students and their parents. These professionals can only provide services within the scope of their training, and therefore, the services offered by individual professionals may vary.

What Training Do School Mental Health Professionals Have?

School counselors, psychologists, and social workers have specific training related to the promotion of healthy social/emotional and behavioral development. In Colorado, all mental health professionals are required to have completed a minimum of a master's degree and to pass a test developed to assess professional knowledge in order to receive a professional educator's license through the Colorado Department of Education. Many school mental health professionals have advanced degrees such as "Education Specialist" or doctorate degrees. Parents can ask the school mental health professional(s) that work with their child to explain their training and credentials.

In Colorado, temporary licensure is available. The Board of Education within each district can request an emergency authorization or a temporary license for someone who is not fully trained. These individuals are intended to work within a limited scope of practice under professional supervision and it is the responsibility of the local school district to ensure this. It is not legal or ethical for a mental health professional to provide services for which he/she is not yet fully trained.

How Are Parents Involved?

Parents are a vital part of developing a plan to meet their child's needs. Parents know their child best and can provide valuable information and ideas that will help in developing effective interventions. Collaboration between school and home assures that planned interventions will be both meaningful and consistent.

When a teacher refers a student for emotional or behavioral concerns, parents must be informed. If further information is needed, requiring an evaluation, parent permission must be obtained according to the district's policies and procedures before the evaluation occurs.

In the case of a student who is eligible for special education services, the Individual Education Program (IEP) team, including the parents, must meet to discuss the student's educational needs and make recommendations for services, including related services. If ongoing counseling is recommended, written parent consent must again be obtained.

Carrie: An Example of Parent Involvement

Carrie is a 10th grade student whose grades and attendance are beginning to decline. Carrie appears to be tired in class and often complains of not feeling well. Her teacher referred Carrie to the school counselor, who obtained parental permission to see Carrie. In talking with Carrie, the counselor learned that her parents are separated and in the process of a divorce. Consequently, Carrie is spending time going between both parents and often finds herself handling responsibility for her younger sisters. After discussing the issues, the counselor decided to invite her parents to a meeting. When informed of Carrie's problems in school, they immediately saw the relationship to her stress at home. With the counselor's support, Carrie's parents developed a consistent schedule for Carrie and her sisters and generated ideas to alleviate her sense of responsibility for her sisters. As she was relieved of some of her duties and learned to better cope with her family situation, Carrie's school participation improved.

What Are the Confidentiality Laws that Apply to School Mental Health Services?

All information provided by students or parents to mental health professionals is considered confidential and won't be discussed with other school personnel. Confidential information can be released only with the informed consent of the student's parent(s) or legal guardian.

However, some exceptions to the confidentiality laws exist:

- All licensed school professionals are required by Colorado laws to report to appropriate child welfare agencies if a child is suspected of being abused or neglected, either physically, sexually or emotionally.
- Mental health professionals and teachers are required to report if a student is considered to be potentially harmful to himself/herself or to others. For example, teachers are not bound by confidentiality if a student confides that they have considered suicide.
- Colorado school laws require that students who bring weapons or drugs to school must be reported to appropriate authorities.

What Is the Difference between School Mental Health Services and Those Provided by Community Mental Health Centers?

School personnel provide mental health services primarily focused on supporting learning and achievement. Since education is the primary mission of schools, mental health services in schools are focused on reducing barriers that prevent a student from achieving to his/her potential. These mental health services are usually short-term and are directed toward the promotion of healthy social and emotional development.

Best practices include the school-wide application of positive behavior supports previously described. More individualized services for targeted groups may include skill training and/or individual or group counseling. It is well documented that applying research based interventions in the classroom setting will improve behavior and academic achievement.

Community mental health center personnel typically provide more intensive mental health treatments that may address family problems, such as grief due to the loss of a family member, substance abuse, and/or individual psychiatric disorders. Although school staff may alert parents to concerns of this nature, it is the parent's decision to seek services at a community mental health center.

Students with psychiatric disorders, such as depression, Post Traumatic Stress Disorder or Bipolar Disorder, are often referred to community mental health centers because of their need for a medication evaluation in addition to ongoing treatment. Services provided by mental health centers typically include short-term individual or group therapy but may also include comprehensive treatments such as day treatment, a 24-hour crisis response system or evaluation for hospitalization. Families need to be aware that there is usually a fee for the services provided at a community mental health center although assistance may be available through a sliding fee scale, Medicaid, or insurance reimbursement.

Interventions provided by schools:

School-related mental health services typically involve a problem solving approach for students who are referred due to emotional concerns. This approach includes providing information to the student and/or their parents about the concern, presenting options for solving the problem, and examining potential outcomes. Positive behavior supports, social skills training, behavior management and parent counseling and training are other approaches that school personnel use.

Scott: An Example of a School Related Intervention

Scott was referred because his classroom behavior was becoming increasingly disruptive. After interviewing Scott and consulting with his teacher, the school psychologist determined that Scott had difficulty with organization and study skills that resulted in his not completing assigned work. The school psychologist taught Scott some specific strategies for organizing his assignments and improving his study skills, including writing assignments down in a notebook to take home. She also met with Scott's parents to discuss with them how they could provide support by developing a consistent routine for completing homework assignments and setting up a good study area in the home. As Scott became better prepared to participate in class, his behavior also improved.

Interventions provided in cooperation with other agencies:

Sometimes problems that appear in school are more complex and are the result of a combination of factors, including peer influences, changes within the family or other environmental stressors. In these situations, school mental health professionals may collaborate with other agencies to address the problems.

Emily: An Example of School/Community Collaboration

Emily, a new third grade student, was experiencing academic and attendance problems. She was shy and withdrawn and seemed extremely unhappy. When Emily's teacher phoned her mother to express her concerns about Emily, Mrs. Brown indicated that the family was having financial hardships due to her husband's recent unemployment. The stress of providing for Emily and her three brothers was overwhelming for Mr. and Mrs. Brown. Emily's teacher gave Mrs. Brown the phone number of the school social worker who visited the family. Mrs. Brown gave permission for the social worker to meet with Emily which resulted in the development of interventions including individual counseling for Emily at school and counseling for other family members at the community mental health center. The social worker also coordinated assistance from other community agencies. Emily and her brothers began participating in after school programs where they received tutoring and she could get support related to her shyness by learning social skills to make new friends. Ultimately, Emily began attending school more regularly and her academic performance improved.

Do Mental Health Professionals from Community Mental Health Agencies Work in Schools?

A current national trend that is also emerging in Colorado's schools is to "co-locate" mental health professionals from community agencies onto school campuses. Many schools have recognized the need for school mental health and community mental health professionals to work together to serve the range of social/emotional and behavioral needs of children. Community mental health professionals can enhance and expand the services provided by school mental health professionals. Since children spend much of their day in school, having community mental health therapists work in partnership with school mental health professionals increases cross-agency communication and access to services. These collaborative efforts increase the potential for children to overcome social/emotional barriers that may prevent them from attaining their educational goals.

Colorado laws allow community mental health professionals to provide mental health treatment to students aged 15 and over without parental permission. School districts that house community mental health therapists should have policies and procedures in place to ensure that parents are informed and involved with any mental health support provided to students. Parents can check with school administrators to determine the procedures at their school.

Is there a Fee for Mental Health Services Provided in Schools?

When students receive services from a school mental health professional as a necessary support to enable them to benefit from education, the service is provided as part of their educational program and there is no fee. Some examples of these types of services include:

- a school counselor provides support to a student as part of the guidance and counseling program for the school;
- a student who qualifies for special education services and has an IEP receives a functional behavior assessment and positive behavior support plan along with individual counseling because his/her socio/emotional functioning significantly interferes with his/her ability to learn. These services are provided by members of the multidisciplinary support team assigned to the school;
- a student who has chronic health problems receives counseling about their health concerns from the school nurse.

When community mental health centers provide services on a school campus, an arrangement is typically made to cover the costs. For example, schools may contract with community agencies to provide mental health services or special grants may fund specific programs. Costs for community mental health services may also be covered by a student's Medicaid insurance, Colorado Children's Health Insurance (CHP), or by the parent's private insurance company, if appropriate.

How Can Schools and Community Agencies Coordinate Services?

When complex situations arise, school mental health professionals typically focus on aspects of the problem that relate to school functioning and achievement. Community mental health staff focus on family, social and/or environmental factors.

Jan: An Example of School and Community Mental Health Center Collaboration

Jan is a middle school student who has suffered a severe traumatic experience and was diagnosed with Post Traumatic Stress Disorder (PTSD). She is now having panic attacks which result in an inability to remain in class. Because of missing school, she is experiencing a drop in her grades.

The school mental health professional worked on:

- *strategies for coping with the panic attacks,*
- *finding ways to help Jan and her teachers understand the antecedents or causes of the panic attacks, in order to reduce their occurrence, and*
- *helping Jan and her teachers find ways to provide a "safe" place when Jan is anxious or is beginning to feel upset so she can remain in school.*

The mental health therapist from a community agency worked with Jan and her family on:

- *consulting with Jan's psychiatrist to evaluate and monitor medications,*
- *helping Jan learn about PTSD and its symptoms that might be interfering with her ability to function,*
- *helping Jan develop strategies for coping, and*
- *working with Jan and her family in identifying and understanding the causes of her panic attacks.*

Jan can now identify what causes her anxiety and is able to ask for assistance, both in school and at home. At school, she can now remain in class and her grades are improving.

As Students Prepare To Leave the School System, How Can their Mental Health Needs Be Met?

As students prepare to transition from school to adult settings, including post-secondary education, employment, and independent living, mental health services and supports should be addressed as part of the student's transition planning process. Services for young adults can be obtained through the public mental health system, as part of a Vocational Rehabilitation plan for employment, through a group or private medical insurance plan, or paid for by the individual.

The public mental health system in Colorado serves persons with mental health needs through community mental health centers throughout the state. An array of services is available to persons with major psychiatric diagnosis, chronic mental illness, or psychiatric emergency, and their families. The Division of Mental Health Services prioritizes eligibility for state-supported services because state funding is limited. Mental health services are provided to persons with mental illness who are Medicaid eligible or who have limited or no health insurance. State-appropriated funds allocated for non-Medicaid individuals are used primarily to contract for services for the seriously, critically or persistently mentally ill. There may be a waiting list for some services. For services nearest to you, refer to your local phone book or contact the state Office of Human Services, Division of Mental Health Services at (303) 866-7400.

The Division of Vocational Rehabilitation (DVR) may provide mental health services as part of an Individual Plan for Employment (IPE), if necessary to assist an eligible person to obtain or maintain employment. A Vocational Rehabilitation counselor would first need to determine if a person is eligible for Vocational Rehabilitation services, and then determine if mental health services would be needed in order to obtain or maintain employment.

Many group and private medical insurance plans provide coverage for mental health services. There may be strict criteria for referral to obtain services and, services are typically time limited. Check with your insurance carrier for specific details about coverage for mental health services.

In addition to, or in place of, the previous options, a person may need to pay directly for mental health services. There are many qualified private mental health providers, and not-for-profit agencies in Colorado. The nearest mental health center, DVR counselor, or insurance carrier may be able to provide names of qualified providers in your community.

Joan: An Example of a Transitioning Student

Joan is nineteen years old and will graduate in May from a small suburban high school. Joan is also completing a two-year program of clerical skills at the local vocational school. She has good filing skills and entry-level computer skills, but is not skilled on the telephone or as a front desk receptionist. Joan has learning disabilities that effect language processing, reading and spelling. When she is anxious, she is very difficult to understand. Joan has been the target of many inappropriate and cruel jokes by her peers and her self-esteem has suffered significantly. Her way of showing anxiety is to act silly in new situations. She does not want to appear foolish in front of her peers so does not ask for help when she doesn't understand something. Joan has been referred to the Division of Vocational Rehabilitation for employment services and has been determined to be eligible to receive DVR services through SWAP (School to Work Alliance Program). Through coordination of services by her special education teacher, who obtained parent permission, Joan has been able to access mental health supports from several sources. She has been connected with the social worker at the high school and is participating in group sessions to learn ways to deal with the teasing she gets from peers and to feel more comfortable talking about her disabilities in order to advocate for what she needs. Because these problems will have an impact on her ability to be successfully employed, Vocational Rehabilitation has agreed to pay for counseling sessions to help Joan learn better ways to handle her anxiety and to relate more appropriately to people in new situations. The SWAP Coordinator who is helping Joan find employment will be working with her in small group sessions and directly on the job site to increase self-advocacy skills and to help her learn more appropriate behaviors with her boss and co-workers.

Who Does a Parent Talk to if They Are Not Satisfied with the Services Being Provided to their Student?

Parents and/or students who have concerns about the mental health services that are being provided by school personnel should speak to the school mental health provider. If the concern is not resolved, the next person to contact would be the School Principal or the Director of Special Education Services for the district.

Concerns about the services being provided by a community mental health therapist who is working in a school should also be discussed with the therapist first, then with the Principal, the school district's Director of Mental Health Services or the therapist's supervisor at the community mental health agency.

Who Monitors the Appropriateness of Mental Health Services Being Provided?

The Educator Licensing Department at the Colorado Department of Education, (CDE) is the monitoring agency that oversees legal and ethical provision of mental health services in the schools for those persons who are licensed by CDE including school psychologists, school social workers, and school counselors. If there are serious concerns regarding ethical standards of practice that have not been resolved by the above process, an individual may also contact one of the mental health consultants in the Special Education Services Unit at CDE. A final step is to file a complaint with the Educator Licensing Office at CDE. Sanctions, including the revocation of a license, can occur if a licensed education professional violates legal and/or ethical standards of practice.

Concerns related to the services provided by community mental health agency personnel who work in schools should be reported to the local community mental health center or to the Colorado Department of Regulatory Agencies. Complaint procedures and contact information are given to each parent and to each student (over fifteen years of age) who consents to mental health treatment provided by a community mental health agency.

These monitoring agencies are the final step for resolution of concerns regarding counseling or other services provided to a student. The contact information for these agencies is listed in the "Resources" section of this guide.

Resources

Colorado Department of Education
Special Education Services Unit
201 East Colfax Avenue
Denver, CO 80203
303-866-6694 Fax: 303-866-6811
www.cde.state.co.us/cdesped

Colorado Department of Regulatory Agencies
1560 Broadway, Suite 1550
Denver, CO 80202
303-894-7855 Fax: 303-894-7885

Colorado Department of Human Services
Mental Health Services
3824 West Princeton Circle
Denver, CO 80236
303-866-7400 Fax: 303-866-7428
www.cdhs.state.co.us

Positive Behavioral Interventions and Support
Technical Assistance Center
Behavioral Research and Training
5262 University of Oregon
Eugene, OR 97403-5262
541-346-2505 Fax: 541-346-5689
www.pbis.org

Publications & Documents

Applying Positive Behavioral Support and Functional Behavioral Assessment in Schools—Technical Assistance Guide 1 Version 1.4.4. (1999). OSEP Center on Positive Behavioral Interventions and Support

Fast Facts—Colorado Department of Education: (1–2 page "basics" on many topics—including mental health, ADHD, Functional Behavioral Assessment, transition requirements, and many more)—Available on the CDE Special Education website: www.cde.state.co.us/cdesped

Federal Register (1999): 64 (48). Part II. Department of Education 34 CFR Parts 300 and 303.

Functional Behavioral Assessment: An Interactive Training Module CD-ROM—Available through Sopris West Publishing, 4093 Specialty Place, Longmont, CO 80504, Phone: 303-651-2829, 800-547-6747, Fax: 303-776-5934, 888-819-7767, www.sopriswest.com

Guidebook for Determining the Eligibility of Students with a Significant Identifiable Emotional Disability (SIED)—Available on the CDE website: www.cde.state.co.us/cdesped

Mental Health: A Report of the Surgeon General (1999). http://www.surgeongeneral.gov/library/mentalhealth

Other Resources

Assets for Colorado Youth
Search Institute—Colorado
1580 Logan Street, Suite 700
Denver, CO 80203
303-832-1587 or 888-KID-7871
www.search-institute.org/acy

National Association of School Psychologists
4340 East West Highway, Suite 402
Bethesda, MD 20814
301-657-0270
www.nasponline.org

American School Counselors Association
801 North Fairfax St., Suite 310
Alexandria, Virginia 22314
703-683-2722 or 800-306-4722
www.schoolcounselor.org

National Association of Social Workers
750 First Street NE, Suite 700
Washington, DC 20002-4241
202-408-8600 or 800-638-8799
www.naswdc.org

Colorado School Counselor Association
6969 Torrey Street
Arvada, CO 80007-7667
303-421-6969
www.cosca.org

National Mental Health Association
1021 Prince Street
Alexandria, VA 22314-2971
703-684-7722 Fax: 703-684-5968
800-969-NMHA
www.nmha.org

Colorado School Social Work Committee
NASW-CO
2345 South Federal Blvd., Suite 200
Denver, CO 80219
303-753-8890 or 888-595-NASW
www.naswco.org

Regional Assessment & Training Center, Inc.
(RATC)
3520 W. Oxford Avenue
Denver, CO 80236
303-761-0193

Colorado Society of School Psychologists
http://www.cssp.gen.co.us

School Social Work Association of America
P.O. Box 2072
Northlake IL 60164
847-289-4527
www.sswaa.org

Colorado Department of Human Services
Alcohol and Drug Abuse Division (ADAD)
4055 S. Lowell Blvd.
Denver, CO 80236
303-866-7480 Fax (303) 866-7481

UCLA—School Mental Health Project
Center for Mental Health in Schools
Department of Psychology
P.O. Box 951563
Los Angeles, CA 90095-1563
310-825-3634
smhp.psych.ucla.edu

Colorado Department of Education
Special Education Services Unit
201 East Colfax Avenue, Room 300
Denver, CO 80203
303-866-6694
www.cde.state.co.us/cdesped

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
National Library of Education (NLE)
Educational Resources Information Center (ERIC)

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